

STATE OF MICHIGAN DEPARTMENT OF NATURAL RESOURCES & ENVIRONMENT LANSING



Northern Lower Peninsula (NLP) Regional Deer Advisory Team Application

Please return this questionnaire by mail or fax to: NLP RDAT Applicants, Michigan Department of Natural Resources and Environment, Wildlife Division, PO Box 30444, Lansing, Michigan 48909, or fax (517) 373-6705.

Applications must be postmarked or submitted via fax by: December 14, 2010.

Name		
Last	Middle	First
	ever been known by, any other name?	
Home Address:		
Street/Cit	ty/State/Zip	
County:		
Home Telephone:	Business Telephone:	
Fax Number:	Cell Number:	
Driver's License Number*:		
Date of Birth*:		
E-Mail Address:		
*Required for background check only	,	

If you intend to represent an organization, please provide:
Organization Name:
Organization Address:Street/City/State/Zip
Position Title within organization:
If your organization is interested in having an alternate for the team, please indicate whether you are applying as the primary or alternate representative (select one): Primary Representative Alternate Representative
How are you or your organization connected to the Northern Lower Peninsula (i.e. organization is based in or has
members in the area, you hunt or live in the area, etc.)?
Why do you want to serve on the NLP Regional Deer Advisory Team?
Describe your experience working with DNRE issues and programs:
Please list your experience as a representative on any committee, work group, council, etc:

Describe your experience working in groups or with individuals to reach cooperative solutions:		
In your experience with committees or working on cooperative solutions, describe what did and what didn't work:		
How comfortable would you be with public speaking or writing documents to be read by the public?		
Speaking (select one): Very Comfortable Somewhat Comfortable Not Comfortable		
Writing (select one): Very Comfortable Somewhat Comfortable Not Comfortable		
What are your personal outdoor interests?		
Have you ever been convicted of a felony or a natural resources violation? Yes or No. If yes, please explain:		
CONSENT AND CERTIFICATION		
I consent to the release of information concerning my ability and fitness for the position to which I seek to be appointed by my employer(s), schools, law enforcement agencies, and other individuals and organizations. I authorize the use of the information provided above to conduct a background search.		
I, (please print name), certify that all statements and representations provided in this statement and on accompanying materials and resume are, to the best of my		
knowledge, true and accurate.		
Signature Date		